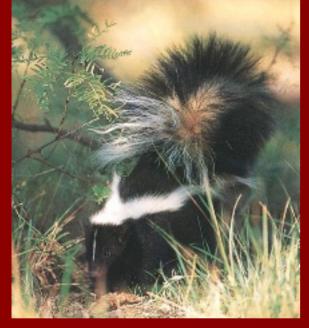
# Rabies Update

Arizona







Elisabeth Lawaczeck, DVM State Public Health Veterinarian

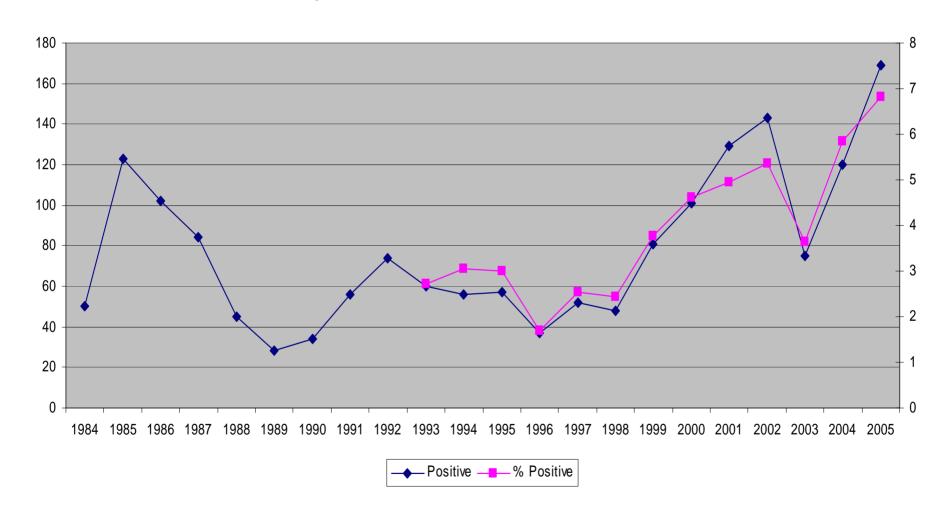


# Rabies Statistics

- 2,551 animals submitted to ASHL in 2005
- 2,481 tested~58.2% domestic~41.8% wild
- 2005- 169 positive (6.8%) – highest on record/yr

Year	Rabid Animals
2001	129
2002	143
2003	75
2004	120
2005	169

# Rabies in AZ 1984 - 2005 Comparison of Positives & Percent Positives



# Lab Confirmed Rabid Animals 2005

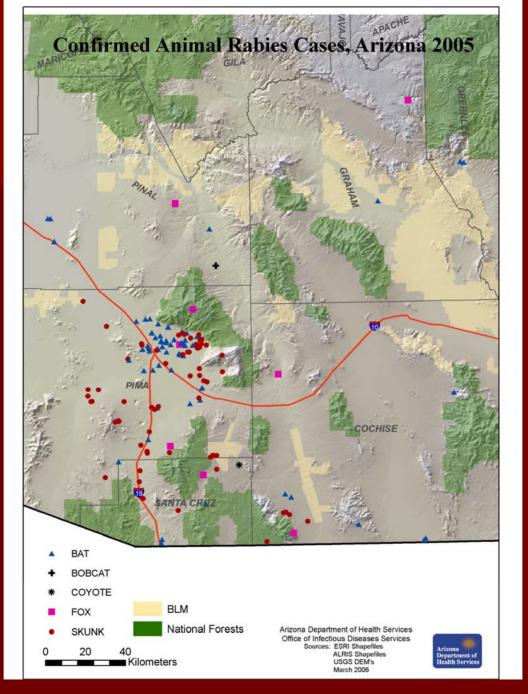
- 84 bats (out of 454 tested) = 18.5% pos
  - 48 from Pima County, 11 in Maricopa County
  - Majority Mexican free-tailed Bats
  - Multiple incidents of bats on school grounds
- 67 skunks (out of 453 tested) ~14.8%
  - 1 in Coconino County Flagstaff– bat variant
  - 55 in Pima County multi-focal epizootic,
     1 raccoon in Tucson- skunk variant
- 12 fox (out of 25 tested)
  - Positive fox in Coconino County west side of Flagstaff, near Thorpe Park, carrying same bat variant as skunks in Flagstaff







# **Confirmed Animal Rabies Cases, Arizona 2005** BAT **BOBCAT** COYOTE BLM FOX National Forests Arizona Department of Health Services Office of Infectious Diseases Services Sources: ESRI Shapefiles ALRIS Shapefiles SKUNK 50 100 Department of Health Services ■ Kilometers USGS DEM's March 2006



# Rabies in Flagstaff

- Variant associated with Big Brown Bat from western U.S.
- After 3 years of no cases p/ TVR in 2001; 217 skunks vaccinated & tagged
- 2004 5 skunks (60 tested)
- 2005 1 skunk (190 tested)
- All in Fox Glenn/Continental Estates neighborhood



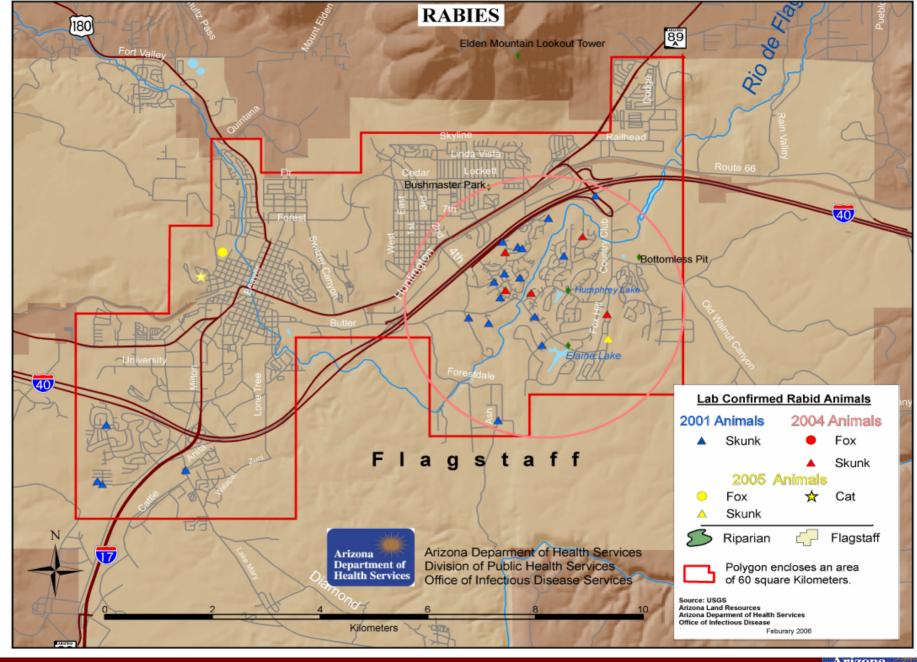


# ORV for skunks

- 1st field trial of oral rabies vaccine in skunks
- Vaccinia-rabies
   glycoprotein recombinant
   virus inside fish meal
   coated sachets
- April 17<sup>th</sup>, Flagstaff distribution of 1,700 sachets over 22.5 sq. km by hand
- 75 baits/ sq. km
- Baiting stations as well







# ORV assessment

- 6 weeks later assessment of serum antibody levels & bait acceptance of 24 skunks in area & in remote area as control group
- Only 6 skunks trapped in neighborhood
- 1 with titer for rabies insufficient for protection
- Small remaining population due to rabies, as well as nuisance trapping & euthanasia
- few complaints from residents
- No reports of ORV exposure to humans/pets by residents

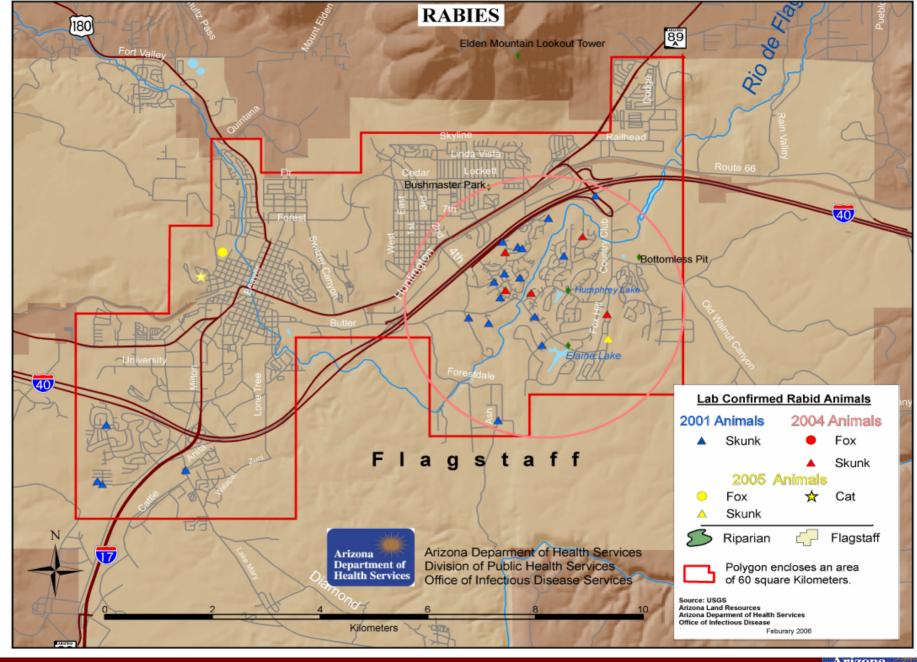


# Rabies in Flagstaff

- Sept 2005 domestic pet cat
  - Owned, but most likely never vaccinated for rabies
  - Allowed to roam during day
  - Many skunks in neighborhood
  - PEP recommended for owner,2 friends, & 5 vet clinic staff
- Oct 2005 gray fox, near Thorpe Park
  - Family of fox living under shed at local armory
  - Additional carcass found
- Both big brown bat variant







# Rabid Cats

- 3 rabid cats from Sept 2005 Jan 2006
- 2 from Santa Cruz County
- 7 yr old adult, spayed cat from Rio Rico
  - previously vaccinated 2x
  - AZ gray fox variant
  - PEP 4 veterinary clinic staff
- 6 wk old kitten- 1 of 4 litter mates from Tumacacori
  - Skunk chased kittens 4 weeks prior to onset, only 2 days prior to litter being given to friend in Amado
  - 2 remaining litter mates
  - Multiple dogs exposed to kittens and to original incident with skunk
  - Skunk variant
  - PEP owner & 2 friends







# Confirmed Rabid Cats - AZ

Year	No. of cases	Location
1982	1	Phoenix –vaccine associated
1987	2	Clifton and Tombstone
1989	2	Tucson and Pinal County
1990	3	2 Pima County, 1 Pinal County
2005	2	Flagstaff & Rio Rico
2006 to date	1	Tumacacori



# Rabid Cats

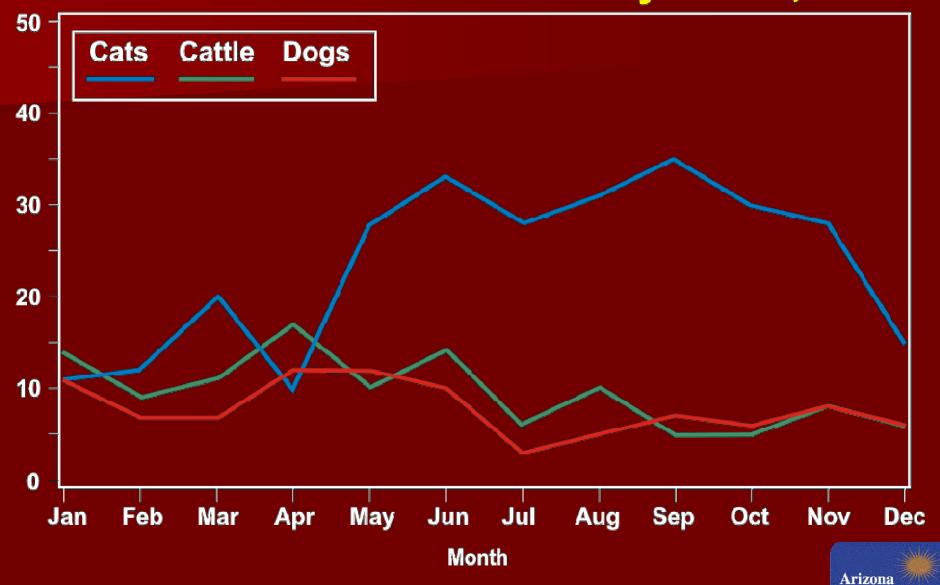
- National trend = more rabid cats/year than rabid dogs/year
- Due to lower vaccination rate of cats
- Perhaps partly due to more roaming (e.g. climb over property walls)
- Feral cats share habitat with skunks and raccoons



Photo -USDA, APHIS, Wildlife Services



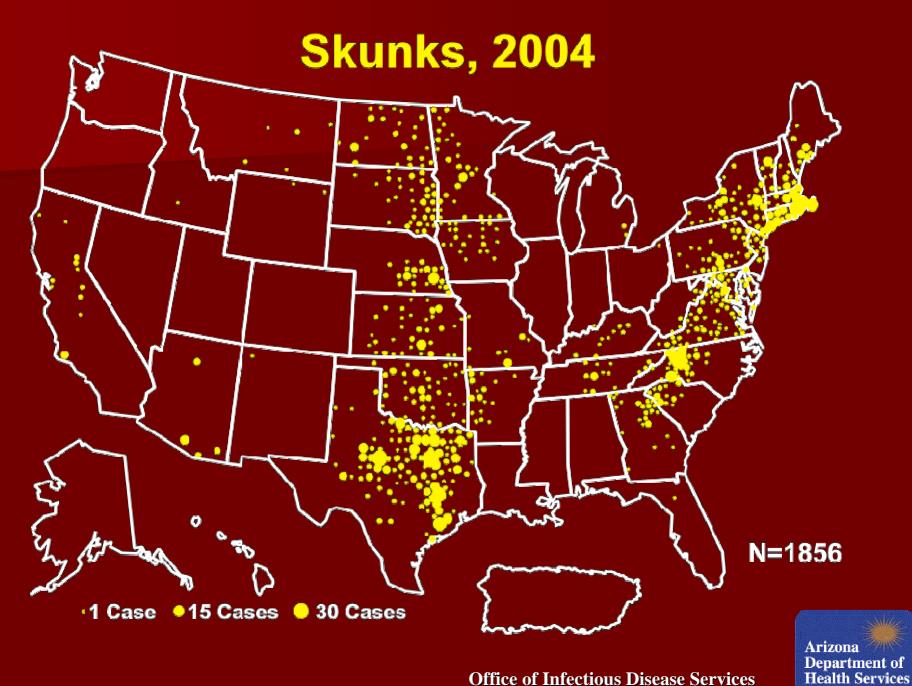
## Rabies in Domestic Animals by Month, 2004



Department of

Health Services





# Lab Confirmed Rabid Animals 2006

- As of March 9th 19 positive animals
- 1 bat, 9 skunks, 8 fox, 1 cat
- All rabid skunks are from Pima County – east side of Tucson
- Fox- 3 from Pinal, Pima, & Santa Cruz each, 1 – Gila County
- 1 fox from Organ Pipe National Monument, on trails
- 3 fox at Boyce ThompsonArboretum + additional decomposed
- Both parks posted signs to warn public







# New Field Test for Rabies

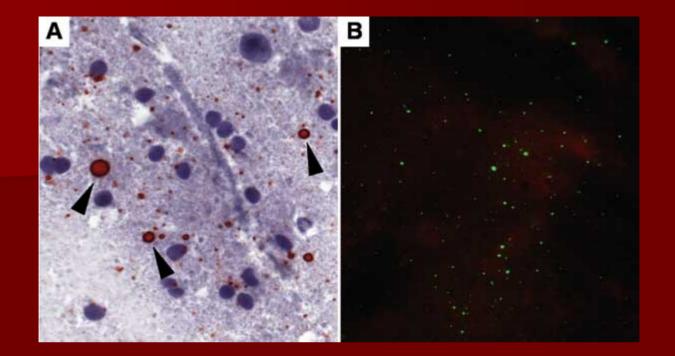
- Direct Rapid Immunohistochemistry Test (dRIT)
- Developed by CDC, under trial by CDC & USDA APHIS Wildlife Services, for surveillance only
- EID Feb 2006- evaluation in Tanzania Wildlife Park: Compared to DFA, traditional standard in rabies diagnosis, dRIT was 100% sensitive & specific
- In AZ, use by Wildlife Services tech, only on feral dog round ups & on wild animals (such as road kills)
- Cannot be used on animals with direct human or domestic animal contact
- Will be used in future for rabies surveillance in raccoons in eastern U.S.



# dRIT vs. DFA

- brain touch impressions as DFA
- observed by light microscopy
- diagnosis to be made in <1 hour</p>
- evaluated dRIT on glycerol-preserved field samples
- Preservation with glycerol saline convenient when refrigeration/freezing not promptly available





- Touch impression of rabies-positive Tanzanian domestic dog brain
- A) Brain stained by dRIT: rabies virus antigen appears as magenta inclusions (arrowheads) against blue neuronal hematoxylin counterstain ×630.
- B) Immunofluorescent apple-green viral inclusions in the same brain processed by DFA. Magnification, ×200.



# **Evaluation Study**

- 159 samples- brain stems from 2002 2004
  - 59 specimens (37.1%) positive for RABV antigen
  - 100 (62.9%) were negative by dRIT
- 100% agreement with DFA
- Assuming DFA-100% sensitive & specific, dRIT-100% sensitive & specific
- dRIT can be successfully performed on samples preserved in glycerol solution for 15 months or frozen for 24 months (duration of preservation in study) & in variable conditions of preservation
- potential value of dRIT for countries with limited diagnostic resources



## Patient Recovers from Clinical Rabies



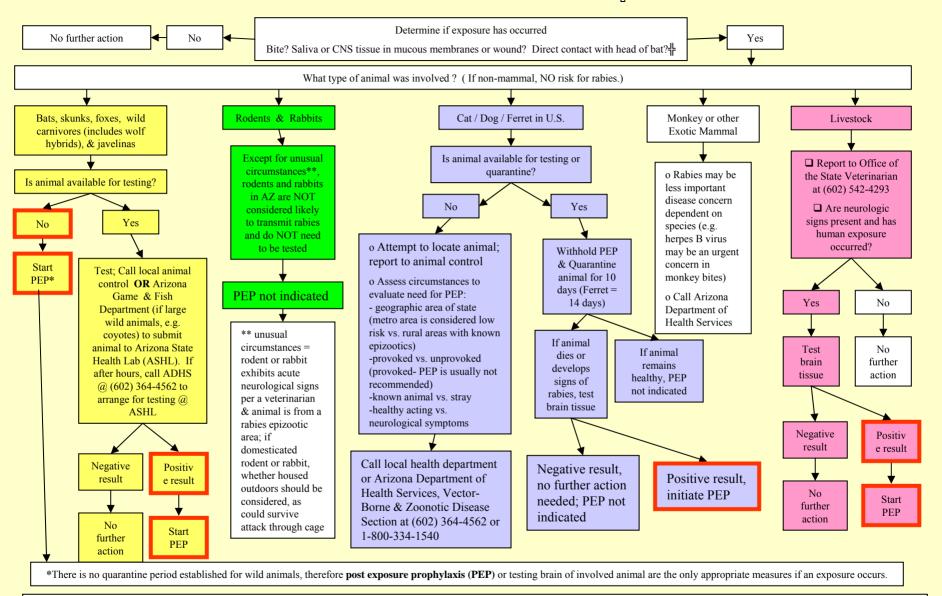


learning to use her arms & legs again & undergoing speech therapy

- 6th known occurrence of human recovery after rabies infection
- 1st documented recovery from clinical rabies by a patient who had not received either PEP before or after onset
- Recovering faster than expected – attending high school now
- New treatment??? -benefits of the regimen received by this patient remain to be determined



### Arizona Department of Health Services Rabies Risk Assessment For Human Exposure To Animals



H Bites by high rabies incidence wildlife species such as bats, skunks, foxes, and to a lesser extent – bobcats and coyotes, warrant emergency testing after hours. PEP should be considered when direct contact between a human and a bat has occurred, unless exposed person is an adult and can be certain that a bite, scratch, or mucous membrane exposure did not occur. Persons who have been sleeping in a room with a bat, and persons with mental impairment or children who are found playing unsupervised with a rabid bat, should be considered for prophylaxis.

If additional questions, call your local health department or Arizona Department of Health Services (ADHS), Vector-Borne & Zoonotic Disease Section at 1-800-334-1540 or (602) 364-4562

# Rabies Post-Exposure Management

Rabies vaccine & human rabies immune globulin (HRIG) should be administered according to the most current recommendations from the Advisory Committee on Immunization Practices; per Human Rabies Prevention –United States, 1999. Centers for Disease Control and Prevention, MMWR 1999:48.

Local Treatment of Wounds: Immediate & thorough washing of all bite wounds with soap & water for 10-15 minutes, AND irrigate with a virucidal agent such as povidone iodine solution. Tetanus prophylaxis and measures to control bacterial infections as indicated.

Immunization: The appropriate protocol for rabies post-exposure prophylaxis (PEP) depends on the exposed patient's previous rabies vaccination history

- ☐ Rabies vaccine: 1ml IM
- ☐ HRIG: 20 IU/kg body weight
- ☐ If anatomically feasible, the full dose of HRIG should be infiltrated around the wound(s). Any remaining HRIG should be administered IM at an anatomical site distant from a muscle used for rabies vaccine administration.

## Treatment Regimen for Patient Not previously vaccinated against rabies

Day 0 = date of initiation of treatment

Day	0	3	7	14	28
HRIG	Х				
Rabies Vaccine	Х	Х	X	Х	Х

If HRIG is not given on day 0, HRIG may be administered within 7 days after rabies vaccine is first administered

# Treatment Regimen for Patient previously vaccinated\* against rabies

Day 0 = date of initiation of treatment

Day	0	3	7	14	28
HRIG	NOT INDICATED				
Rabies Vaccine	Х	Х	no	no	no

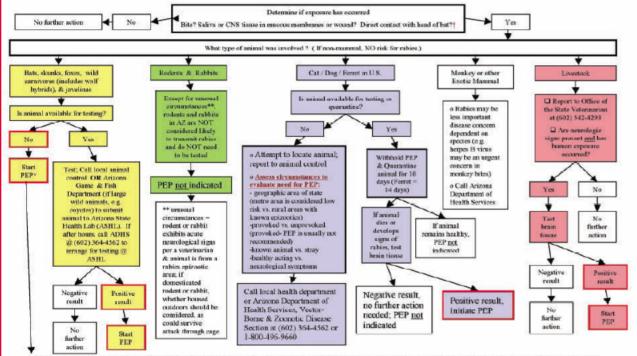
\* Previously vaccinated = person with history of a complete pre-vaccination (3 doses) with Human Diploid Cell Vaccine (Imovax), Purified Chick Embryo Cell Vaccine (RabAvert), or rabies vaccine adsorbed (RVA);

OR

person with prior vaccination with any other type of rabies vaccine (usually prior to c.1980) with a prior documented history of antibody response to rabies vaccinated of Infectious Disease Services Health Services

# Arizona Department of Health Services Rabies Risk Assessment for Human Exposure to Animals and Rabies Post Exposure Management

#### **Rabies Risk Assessment For Human Exposure to Animals**



"There is no quarantine period established for wild animals, therefore post exposure prophylaxis (PEF) or testing brain of involved animal are the only appropriate measures if an exposure occurs.

† Bites by high rabies incidence wildlife species such as bets, skunks, foxes, and to a lesser extent — bobests and coyotes, warrant emergency testing after hours. PEP should be considered when direct contact between a human and a bat has occurred, unlesse exposed person is an adult and can be certain that a bits, scratch, or mneous membrane exposure did not occur. Persons who have been sleeping in a received with a bat, and persons with mental important or children who are found playing unsupervised with a rabid bat, should be considered for prophylaxis.

If additional questions, call your local health department or Arizona Department of Health Services (ADHS), Vector-Borne & Zoonotic Disease Section at 1-800-496-9660 or (602) 364-4562

#### **Rabies Post-Exposure Management**

Rabies vaccine & human rabies immune globulin (HRIG) should be administered according to the most current recommendations from the Advisory

Treatmen Day	vaccin	ated ag	Patient Nainst rab	ies	n ann ra <del>ll</del> i
Day	0	3	7	14	28

#### AFTER HOURS RABIES RISK ASSESSMENT CONTACTS

For Health Care Providers

If county health department staff who are knowledgeable about rabies risk assessment are not available, please call the Arizona Department of Health Services at: (602) 364-4562 or 1-800-496-9660.

#### CONTACT INFORMATION for RABIES RISK ASSESSMENT:

County	After-Hours On-call phone/pgr.	During Business Hours
APACHE	Sheriff's Dispatch: (928) 337-4321	(928) 337-7607 Alternate: (928) 333-2415
COCHISE	Administrator on call (520) 249-3022	(520) 432-9464 OR (520) 249-0657
COCONINO	Pager (928) 913-6744	(928) 226-2771 OR (928) 226-2769
GILA	Rabies control 24/7 Pager Globe area (928) 402-5053 Payson area (928) 601-2344	(928) 425-5882 OR (928) 402-8817
GRAHAM	Sheriff's office (928) 428-3141	(928) 428-0110
GREENLEE	Sheriff's office (928) 865-4149	(928) 865-2601 OR (928) 865-2601
LA PAZ	(928) 669-2281	(928) 669-6155
MARICOPA	(602) 747-7111 OR Poison Control Center (602) 253-3334	Adult Immunization Pager (602) 779-1358 (dial number from which you are calling after beep)
MOHAVE	(928) 718-4927	(928) 718-4927
NAVAJO	Call ADHS	(928) 524-4750
PIMA	(520) 743-7987	(520) 740-8315
PINAL	Sheriff's Office dispatch	

(520) 866-7319

(520) 375-7900 OR

(520) 841-0477

(520) 866-5111

(800) 352-3796

Call ADHS

SANTA

CRUZ

# **Arizona Department of Health Services**





# EID article

Lembo T, Niezgoda M, Velasco-Villa A, Cleaveland S, Ernest E, Rupprecht CE. Evaluation of a direct, rapid immunohistochemical test for rabies diagnosis. Emerg Infect Dis. 2006 Feb



# ORV for skunks

- persons w/ altered immunocompetence & persons for whom smallpox vaccination is contraindicated (e.g. pregnant, exfoliative skin condition) can have adverse event associated with contact with ORV
- Public education- (press releases, press conference, community meeting, door to door):
  - decrease the possibility of adverse events associated with V-RG
  - Pet owners must keep animals confined so that ORV can be found by skunks and other non-target wild species, instead of pets
  - Increase awareness among physicians & vets



# Skunks and Rabies

Questions and Answers About Oral Rabies Vaccine Spring 2005



# Adverse Event - ORV

- 44.5 million ORV distributed in U.S.
- Only one adverse event reported
- Ohio 2000 28 y.o. pregnant woman with epidermolytic hyperkeratosis
  - Mild abrasion on forearm & puncture of forefinger from dog bite, when tried to remove bait from her dog's mouth
  - Vesicular rash appeared 3 days p/ bite, progressed to 2 cm in diameter, and became necrotic
  - Fasciotomy and excision of necrotic dermis led to large scar
  - Generalized erythroderma, generalized exfoliation on face & neck
  - 34 days for symptoms to resolve, had normal baby
  - orthopox virus morphology found on EM of excised eschar, PCR positive for V-RG







# ORV in skunks – Flagstaff Quarantine

- approved by County Board of Supervisors on April 5<sup>th</sup>, begins on April 17<sup>th</sup> - up to 60 days
- Quarantine area southeastern Flagstaff (N - Mt. Elden, E - Old Walnut Canyon, W – Schweitzer Canyon Rd, southern city limits,
- Trapping and/or transporting skunks not allowed w/o approval from HD
- All owned dogs & cats must be vaccinated and confined (also - if on walk, leash < 6ft).</li>
- No pet food outdoors after sundown
- Compost & trash containers must be enclosed + skunk & rodent proof
- USDA lay ORV & trap skunks on private property



